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20999 7590 09/25/2007

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FILED VIA EFS WEB

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/712,118	11/13/2003	Toshiyuki Takai	671302-2002	8301

TITLE OF INVENTION: NON-HUMAN ANIMAL MODEL OF OLIGODENDROCYTE DEVELOPMENTAL DISORDER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/26/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HAMA, JOANNE	1632	800-009000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 FROMMER LAWRENCE + HAUG LLP
 2 THOMAS J. KOWALSKI
 3 DEBORAH L. LU, PH.D.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**JAPAN SCIENCE AND TECHNOLOGY
AGENCY**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Publication Fee (No small entity discount permitted)
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Authorized Signature Deborah L. Lu

Date 21 DECEMBER 2007

Typed or printed name DEBORAH L. LU

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